

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>HA</i>	<i>70891</i>	<i>6/30</i>
O.I.P.E. CLASSIFIER			<i>7-12-60</i>
FORMALITY REVIEW		<i>65372</i>	<i>8-24-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 II Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	<i>10/10/63</i>
2	<i>4/17/64</i>
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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